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Acknowledged Examiner's Signature Initials ADDRESS				STATE OR COUNTRY NETHERLAND	DR	SHEETS TOT DRAWING CLA 20 43		IMS	INDEPENDENT CLAIMS 6
27890 TITLE Composition									
, RECEIVED	No	ES: Authority has been given in Paper to charge/credit DEPOSIT ACCOUNT for following:				☐ All Fees ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time) ☐ 1.18 Fees (Issue) ☐ Other ☐ Credit			